Sheet1

Circula	ted By	SD	Signer	Page Num	Full add	lress	City
Erin D	ecker	22	Jeffrey H. Eckert	4	1309 74 ⁻	гн ѕт	

AFFIDAVIT

STATE OF WISCONSIN) SS COUNTY)
Jellroy H Ecker being first duly sworn on oath, deposes and states as follows: 1. I an adult resident of the 77 State Senate District and I am a qualified elector, i.e., either
registered to vote or eligible to register and vote. 2. Bout a Month ago I was at a Fishing The state of th
Derby at Marino's out on HWY 50, by New Murster, a woman approached me and asked me to sign a petition. The Had I known the petition was to recall a democrat, I would not have signed the petition
netston. The Had I Known the petition was
to recall a democrat, I would not have
Signed the per Hou
Alley H Ever
Subscribed and sworn to before me this O day of Commission Notable Public, State of Wisconsin My Commission JOHN L. ALBERT NOTARY PUBLIC Subscribed and sworn to before me this 4 - 27 - 2012

STATE OF WISCONSIN

TO: Wiscousin Government Accountability Board (official with whom nomination papers or declaration of candidacy for the office is filed)

We, the undersigned qualified electors of the 22 Wisconsin State Senate District (jurisdiction or district of officeholder)

22 District State Senate of Wisconsin petition for the recall of Robert Wirch (name of officeholder to be recalled and office)

from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and §.9.10 of the Wisconsin Statutes.

STATEMENT OF REASON FOR RECALL

(The reason for recall must be stated on petitions for city, village, town, and school district officials. The reason must be related to the official responsibilities of the officeholder. No statement of reason is required to initiate the recall of state, congressional, legislative, judicial, or county officials.)

Refusing to represent the citizens of Wisconsin 22" State Senate District in Madison.



THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT.										
THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.										
SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE	MUNICIPALITY OF RESIDENCE	DATE OF							
	Rural address must also include box or fire no.	Indicate Town, City, or Village	SIGNING							
'Shall	163+ Sunset Dr	Drown TwinLakes	2/26/11							
2. Se Sennes	250 Lance Dr	Drown Twin Lakes	2/26/11							
3. PON (YAND)	30729 112T	THOWN INVIIIAGE SALEM	2-/21/1							
4. Katre Buri	1854 SUNSET dr. Twn lakes, WI	Britiage TWIN LAICES	2/26/17							
5. Ander Dollar	TUN Lake 5 WIL	Davillage City Market								
6 Jeffrey H Ecker	1309 14th St Hawhie	U Town U Village QCity	7961							
7. Sur 74'	Burlington we 51105	Dillage Dorlagton	2/24/11							
8. Jeff Buther	Burkingta Wis	Village Wheatland	2-26-11							
"Russell ours	7712 27th and 62143	UVIIIBO KENOSHA	2.26.11							
Constanc Sangrey	34410 Bousself Rd BAS	Strown Utiliage Bassett City Kandall	2-26-1							
Certification of Circulator I, Erin Decker , certify:										
I reside at 706 School Street Silver Lake, WI 53170. (circulator's residence - Include number, street, and municipality)										
(circulator's residence - include number, street, and manicipality)										
l personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction o district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under										
§.12.13(3)(a), Wis. Stats. 2-3(0-1) Crim Declea (signature of circulator)										
Please mail this form to: Recall Wirch										
GAB-170 (Rev. 6:2007) The information on this form is required by §§ 8.40 and 9.10, Wis. Stats. P.O. Box 26 • Silver Lake, WI 53170 Www.RecallWirch.com • RecallWirch@gmail.com Www.RecallWirch.com										